Case 17-35621-KRH Doc 13 Filed 11/17/17 Entered 11/17/17 13:13:05 Desc Main Document Page 1 of 56

Fill in this inform	mation to identify your	case:			
Debtor 1	Vincent E Harris				
	First Name	Middle Name	Last Name		
Debtor 2	Janet L Harris				
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
Case number	17-35621				
(if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	127,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	144,225.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	271,225.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	194,131.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	43,454.00
	Your total liabilities	\$	237,585.00
⊃ar	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,977.39
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,127.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Jeptor 1	vincent E Harris		
Debtor 2	Janet L Harris	Case number (if known) 17-3562 1

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9,706.83

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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				Doo	cument	Page 3 of 56			
Fill	in this infor	mation to identify	your case and th	nis filing	j:				
Deb	otor 1	Vincent E Ha	arris						
		First Name		e Name		Last Name			
Deb	otor 2	Janet L Harr	is						
(Spo	use, if filing)	First Name	Middle	e Name		Last Name			
Unit	ted States Ba	ankruptcy Court for	the: EASTERN	DISTRI	CT OF VIRG	INIA			
Cas	se number	17-35621				_			Check if this is a amended filing
Sc	chedul	orm 106A/E e A/B: Pi separately list and d	operty	an asset	only once. If	an asset fits in more than one	e category, lis	t the asset in	12/15 the category where you
nfor	mation. If mor ver every ques	re space is needed, stion.	attach a separate s	heet to tl	nis form. On th	le are filing together, both are ne top of any additional pages wn or Have an Interest In			
1.1	Yes. Where	is the property?		What	is the propert	. y? Check all that apply			
	1304 Poc	o Drive			Single-family	•	Do not dod	ust assured als	nims or exemptions. Put
	Street address,	if available, or other des	cription		Duplex or mu	Ilti-unit building n or cooperative	the amount	of any secure	d claims on Schedule D: ns Secured by Property.
	Richmone	d VA	23235-0000		Manufactured Land	d or mobile home	Current va entire prop		Current value of the portion you own?
	City	State	ZIP Code		Investment p	roperty	\$11	2,700.00	\$112,700.00
					Timeshare		Describe tl	ne nature of v	our ownership interest
							(such as fe	e simple, ten	ancy by the entireties, o
				_		t in the property? Check one	a lite estat	e), if known.	
	Chesterfic	ald			Debtor 1 only				
	County	- GIG		_	Debtor 2 only				
	County						munity property		
				☐ 245-2		of the debtors and another	`	tructions)	
					r information y erty identificat	ou wish to add about this ite ion number:	m, such as lo	cal	

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	otor 1 otor 2	Vincent E Harris Janet L Harris	Case	number (if known) 17-3	35621
1.2	If you	u own or have more than one, list h	nere: What is the property? Check all that apply		
		Share Wyndam	☐ Single-family home	Do not deduct secured cla	
	Street a	ddress, if available, or other description	Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clair	
	City	State ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property	Current value of the entire property? \$8,500.00	Current value of the portion you own? \$8,500.00
			Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Describe the nature of y (such as fee simple, ten a life estate), if known.	our ownership interest ancy by the entireties, or
	County		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter property identification number:	☐ Check if this is com (see instructions)	nmunity property
1.3	If you	u own or have more than one, list h	nere: What is the property? Check all that apply		
		share Bahammas ddress, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured class the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
			☐ Manufactured or mobile home ☐ Land	Current value of the entire property?	Current value of the portion you own?
	City	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one ☐ Debtor 1 only	\$3,300.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	\$3,300.00 our ownership interest ancy by the entireties, or
	County		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iterproperty identification number:	Check if this is com (see instructions) n, such as local	nmunity property

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Debt		anet L Harris		Case number (if known)	17-35621
	If you o	wn or have more than one	, list here:		
1.4			What is the property? Check all that apply	'	
_		are Williamsburg2800.00	Single-family home		ured claims or exemptions. Put
	Street addre	ess, if available, or other description	Duplex or multi-unit building		secured claims on Schedule D: re Claims Secured by Property.
			Condominium or cooperative		
			☐ Manufactured or mobile home		
			Ξ	Current value of the	
-			Land	entire property?	portion you own?
	City	State ZIP C	<u> </u>	\$2,500	9.00 \$2,500.00
			■ Timeshare	Describe the natu	re of your ownership interest
			Other	. Pe	le, tenancy by the entireties, or
			Who has an interest in the property?	Check one a life estate), if kn	own.
			☐ Debtor 1 only		
-			Debtor 2 only		
	County		Debtor 1 and Debtor 2 only	☐ Check if this	is community property
			At least one of the debtors and ar	nother (see instructions)
			Other information you wish to add about the property identification number:	out this item, such as local	
	Add the d	Iollar value of the portion you	own for all of your entries from Part 1, incl	uding any entries for	
p	ages yo	u have attached for Part 1. Wr	ite that number here	=>	\$127,000.00
art 2	Dogori	ibe Your Vehicles		l	
Ca	ırs, vans	, trucks, tractors, sport utility	so report it on Schedule G: Executory Contrac vehicles, motorcycles	,	
0.4		Toyota	W	Do not deduct sec	ured claims or exemptions. Put
3.1	Make:	Toyota	Who has an interest in the property? Check o	the amount of any	secured claims on Schedule D:
	Model:	Rav 4	Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2017	Debtor 2 only	Current value of t	
		mate mileage: 6500	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$25,000	\$25,000.00
3.2	Make:	Toyota	Who has an interest in the property? Check		ured claims or exemptions. Put
J. <u>Z</u>	Model:	Camry	Debtor 1 only	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2014	- <u> </u>	Creditors with Ha	ve Giairiis Secureu by Property.
		CEOOO	Debtor 2 only	Current value of t	
			Debioi i and Debioi 2 only	entire property?	portion you own?
	Other in	formation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$9,725	\$9,725.00

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Debte Debte		Vincent E Harris Janet L Harris		Case number (if known)	17-35621
3.3	Make: Model Year:	DV 050	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any	ured claims or exemptions. Put secured claims on <i>Schedule D:</i> ve Claims Secured by Property.
	Appro		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of tentire property?	the Current value of the portion you own?
			Check if this is community property (see instructions)	\$9,500 	9,500.00
Exa	amples.		TVs and other recreational vehicles, other vehicles onal watercraft, fishing vessels, snowmobiles, motorcyc		
			you own for all of your entries from Part 2, including . Write that number here		\$44,225.00
		cribe Your Personal and House n or have any legal or equite	ehold Items rable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	kample. No	Id goods and furnishings s: Major appliances, furniture Describe	e, linens, china, kitchenware		
Ex	kample No	s: Televisions and radios; aud including cell phones, cam	dio, video, stereo, and digital equipment; computers, prieras, media players, games	rinters, scanners; music c	ollections; electronic devices
8. Co <i>E</i> x	llectib	Describe les of value s: Antiques and figurines; pai other collections, memoral	intings, prints, or other artwork; books, pictures, or othe bilia, collectibles	er art objects; stamp, coin,	or baseball card collections;
9. Eq <i>E</i> >	uipme	Describe Int for sports and hobbies S: Sports, photographic, exerging musical instruments	cise, and other hobby equipment; bicycles, pool tables,	, golf clubs, skis; canoes a	and kayaks; carpentry tools;
10. F i	Yes. [
	No	es: Pistols, rifles, shotguns, a Describe	ammunition, and related equipment		
E	No .	es: Everyday clothes, furs, lea	ather coats, designer wear, shoes, accessories		
<i>E</i>	No .		ne jewelry, engagement rings, wedding rings, heirloom j	jewelry, watches, gems, g	jold, silver
		Describe 106A/B	Schedule A/B: Property		page

Case 17-35621-KRH Doc 13 Filed 11/17/17 Entered 11/17/17 13:13:05 Desc Main Document Page 7 of 56 Vincent E Harris

	ebtor 1 ebtor 2	Janet L Harris	Case number (if kn	iown)	17-35621
40	Non for	m onimala			
13.		m animals les: Dogs, cats, birds, horses			
	■ No				
	☐ Yes.	Describe			
14.	Any oth ■ No	ner personal and household items you did	not already list, including any health aids you did not li	st	
	_	Give specific information			
				Г	
15		ne dollar value of all of your entries from F rt 3. Write that number here	Part 3, including any entries for pages you have attached	d	\$0.00
Pa	rt 4: Des	scribe Your Financial Assets			
		n or have any legal or equitable interest ir	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	les: Money you have in your wallet, in your h	ome, in a safe deposit box, and on hand when you file your	petitio	·
17.		ts of money les: Checking, savings, or other financial accionstitutions. If you have multiple accounts	ounts; certificates of deposit; shares in credit unions, broker s with the same institution, list each.	age h	ouses, and other similar
	■ No		la attestica a sacra		
	☐ Yes		Institution name:		
18.	_Examp	mutual funds, or publicly traded stocks les: Bond funds, investment accounts with br	okerage firms, money market accounts		
	■ No □ Yes	Institution or issuer	name:		
19.	Non-pu joint ve ■ No		orated and unincorporated businesses, including an in	terest	in an LLC, partnership, and
		Give specific information about them			
		Name of entity:	% of ownership:		
20.	Negotia Non-ne		otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.		
	■ No	O'con an artification of the set the set			
	☐ res. (Give specific information about them Issuer name:			
21.	_Examp	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sha	aring p	olans
	■ No □ Yes. L	ist each account separately. Type of account:	Institution name:		
22	Security	y deposits and prepayments			
	Your sh	nare of all unused deposits you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications co	mpani	ies, or others
	■ No □ Yes		Institution name or individual:		
23.	Annuiti	es (A contract for a periodic payment of mon-	ey to you, either for life or for a number of years)		

Official Form 106A/B Schedule A/B: Property page 5

■ No

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	ebtor 1 ebtor 2	Vincent E Janet L H			Ca	ase number (if known)	17-356	21
	☐ Yes		Issuer name and d	escription.				
24.	26 U.S.C		ation IRA, in an acc 1), 529A(b), and 529		program, or under a quali	ified state tuition pro	gram.	
	■ No □ Yes		Institution name an	d description. Separately fil	e the records of any interes	sts.11 U.S.C. § 521(c):		
25.	Trusts, ■ No	equitable or	future interests in	property (other than anyt	hing listed in line 1), and	rights or powers exe	rcisable	for your benefit
	☐ Yes. (Give specific	information about th	nem				
26.				secrets, and other intelle sites, proceeds from royaltie	ectual property es and licensing agreements	s		
		Give specific	information about th	nem				
	Exampl ■ No	es: Building	•	censes, cooperative associa	ation holdings, liquor license	es, professional license	es	
	☐ Yes. (Give specific	information about th	nem				
M	oney or p	roperty owe	ed to you?				por Do	rent value of the tion you own? not deduct secured ms or exemptions.
28.	Tax refu	ınds owed t	o you					
	■ No	S	Safanasa da a abasad da	and Saak Banashadian	along the Clark the continues and	Lith a day, or a ma		
	⊔ Yes. G	sive specific	information about the	em, including whether you a	already filed the returns and	the tax years		
29.	Family s Example ■ No		or lump sum alimon	y, spousal support, child su	pport, maintenance, divorce	e settlement, property	settleme	nt
	_	Give specific	information					
30.	Exampl	les: Unpaid w		rance payments, disability lade to someone else	penefits, sick pay, vacation	pay, workers' comper	sation, S	ocial Security
	■ No □ Yes.	Give specific	information					
31.	_Exampl	s in insuran /es: Health, d		ance; health savings accou	nt (HSA); credit, homeowne	er's, or renter's insuran	ce	
	■ No	Jame the inc	urance company of	each policy and list its value				
	□ 163.1v	varrie trie iris	Company n		Beneficiary	r:		rrender or refund lue:
	If you a someor	erest in properest in properest in properest. In properest in properest in properest.	perty that is due you ciary of a living trust	u from someone who has , expect proceeds from a lif	died e insurance policy, or are cu	urrently entitled to rece	ive prope	erty because
	■ No	Civo ana sifia	information					
	□ res. v	Give specific	information					
33.	_Exampl	-	•	or not you have filed a law tes, insurance claims, or riç	suit or made a demand fo ghts to sue	or payment		
	■ No □ Yes. I	Describe ead	ch claim					
34.	Other co	ontingent ar	nd unliquidated cla	ims of every nature, inclu	ding counterclaims of the	debtor and rights to	set off o	laims
	■ No							

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Debtor Debtor				Case number (if known)	17-35621
ΠY	es. Describe each claim				
	y financial assets you did not all lo 'es. Give specific information	ready list			
		Workmens Comp			\$100,000.00
		Working Comp			
	dd the dollar value of all of your or Part 4. Write that number here	•		•	\$100,000.00
Part 5:	Describe Any Business-Related Pro	operty You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. Do y	ou own or have any legal or equitab	le interest in any business-relate	ed property?		
■ No	o. Go to Part 6.				
☐ Ye	ss. Go to line 38.				
Part 6:	Describe Any Farm- and Commerci If you own or have an interest in farm		Own or Have an Interes	st In.	
46. Do	you own or have any legal or ed	quitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.				
	Yes. Go to line 47.				
Part 7:	Describe All Property You Ow	n or Have an Interest in That You	ı Did Not List Above		
	you have other property of any amples: Season tickets, country cl		?		
	es. Give specific information				
54. A	dd the dollar value of all of your	entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of t	his Form			
55. P a	art 1: Total real estate, line 2				\$127,000.00
56. P a	art 2: Total vehicles, line 5		\$44,225.00		
57. P a	art 3: Total personal and housel	nold items, line 15	\$0.00		
	art 4: Total financial assets, line		\$100,000.00		
	art 5: Total business-related pro	• •	\$0.00		
	art 6: Total farm- and fishing-rel	• • •	\$0.00		
61. P a	art 7: Total other property not lis	stea, line 54 +	\$0.00		
62. T o	otal personal property. Add lines	56 through 61	\$144,225.00	Copy personal property t	otal \$144,225.00
63. T o	otal of all property on Schedule	A/B . Add line 55 + line 62			\$271,225.00

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		Docume	int rage to or so		
Fill in this info	rmation to identify your	case:			
Debtor 1	Vincent E Harris				
	First Name	Middle Name	Last Name		
Debtor 2	Janet L Harris				
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Bankruptcy Court for the:		EASTERN DISTRICT (OF VIRGINIA		
Case number	17-35621				
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

יטו	ne applicable statutory amount.							
Pa	rt 1: Identify the Property You Claim as	Exempt						
1.	Which set of exemptions are you claiming	g? Check one only, eve	n if yo	our spouse is filing with you.				
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption.					
	1304 Poco Drive Richmond, VA 23235 Chesterfield County	\$112,700.00		\$10,000.00	Va. Code Ann. § 34-4			
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	Workmens Comp Line from Schedule A/B: 35.1	\$100,000.00		\$100,000.00	Va. Code Ann. § 65.2-531			
	Line nom schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cove	3 years after that for ca	ises fi	,	,			

No Yes

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		Document Page	11 01 56		
Fill in this informatio	n to identify you	r case:			
Debtend					
	incent E Harris	Middle Name Last Name			
		Middle Name Last Name			
	anet L Harris	Middle Name Last Name		-	
(Spouse II, IIIIIIg)	St Name	Middle Name Last Name			
United States Bankrup	tcy Court for the:	EASTERN DISTRICT OF VIRGINIA			
				-	
Case number 17-35	5621				
(if known)				_	if this is an
				ameno	led filing
000 : 1 = 46					
Official Form 10	<u> 16D</u>				
Schedule D:	Creditors	Who Have Claims Secur	ed by Propert	V	12/15
Coriodalo D.	or cartors	Title Have claims cocar		J	12,10
		f two married people are filing together, both are			
is needed, copy the Addi number (if known).	itional Page, fill it c	out, number the entries, and attach it to this form	n. On the top of any additio	nal pages, write your na	me and case
` ,	.1.1				
1. Do any creditors have	•				
☐ No. Check this	box and submit th	nis form to the court with your other schedules	s. You have nothing else t	to report on this form.	
Yes. Fill in all o	f the information b	pelow.			
Part 1: List All Sec	cured Claims		. Column A	Column B	Column C
		nore than one secured claim, list the creditor separa	itely		
		a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.	As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
much as possible, list the	ciairis in aipriabelic	cal order according to the creditor's name.	value of collateral.	claim	If any
2.1 Conrad Accpt		Describe the property that secures the claim:	\$3,450.00	\$3,300.00	\$150.00
Creditor's Name		Timeshare Bahammas			
476 W Vermor	nt Ave	As of the date you file, the claim is: Check all that apply.			
Escondido, Ca	A 92025	☐ Contingent			
Number, Street, City, S	State & Zip Code	☐ Unliquidated			
	·	☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
_		car loan)	Secured		
Debtor 2 only		,			
Debtor 1 and Debtor 2		☐ Statutory lien (such as tax lien, mechanic's lien)		
☐ At least one of the deb		☐ Judgment lien from a lawsuit			
☐ Check if this claim re	elates to a	Other (including a right to offset)			
community debt					
	Opened				
	12/07/14				
	Last Active				
Date debt was incurred		Last 4 digits of account number 791	4		
Ocwen Loan S	Servicina				
Lic	bei vicing,	Describe the property that secures the claim:	\$99,646.00	\$112,700.00	\$0.00
Creditor's Name		1304 Poco Drive Richmond, VA			
Attn:		23235 Chesterfield County			
Research/Ban	kruptcy	_			
1661 Worthing		As of the date you file, the claim is: Check all that			
100		apply. Contingent			
West Palm Bc	h, FL 33409	- Contingent			
Number, Street, City, S	State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
■ Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		

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☐ Judgment lien from a lawsuit

 \square At least one of the debtors and another

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Debtor 1 Vincent E Harris		Case number (if know)	17-35621	
First Name Middle N Debtor 2 Janet L Harris	ame Last Name			
First Name Middle N	ame Last Name			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 08/06 Last Active 9/15/17	Last 4 digits of account number 985	58		
2.3 Old Point National Ban	Describe the property that secures the claim:	\$24 E02 00	¢0 500 00	¢15 002 00
Creditor's Name	2010 Lexus RX 350 94000 miles	\$24,593.00_	\$9,500.00	\$15,093.00
1 W Mellen St Hampton, VA 23663 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	r secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 09/17 Last Active Date debt was incurred 9/29/17	Last 4 digits of account number 443	35		
2.4 Toyota Motor credit Corp Creditor's Name	Describe the property that secures the claim: 2017 Toyota Rav 4 6500 miles	\$38,283.00	\$25,000.00	\$13,283.00
Po Box 8026 Cedar Rapids, IA 52408 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ■ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	r secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	n)		
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Opened 05/17 Last Active 10/06/17	Last 4 digits of account number 000	01		
2.5 Toyota Motor credit Corp	Describe the property that secures the claim:	\$15,997.00	\$9,725.00	\$6,272.00
Creditor's Name	2014 Toyota Camry 65000 miles		+0,- 10.00	+ -,
Po Box 8026 Cedar Rapids, IA 52408	As of the date you file, the claim is: Check all that apply. Contingent			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1 Vincent E Harris		Case number (if know)	17-35621	
First Name Middle Na	ame Last Name			
Debtor 2 Janet L Harris First Name Middle Na	ame Last Name			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or sector car loan)	ured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Opened 12/13 Last Active	0004			
Date debt was incurred 9/25/17	Last 4 digits of account number 0001			
2.6 Tricom Management	Describe the property that secures the claim:	\$2,800.00	\$2,500.00	\$300.00
Creditor's Name	Timeshare Williamsburg2800.00		Ψ=,00000	V
4025 E La Palma Avenue # 1 101	As of the date you file, the claim is: Check all that apply.			
Anaheim, CA 92807	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or sectoral loan)	ured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 3082			
2.7 Wyndham Vacation Ownership	Describe the property that secures the claim:	\$9,362.00	\$8,500.00	\$862.00
Creditor's Name	Time Share Wyndam			
6277 Sea Harbor Dr Orlando, FL 32821	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or section)	ured		
■ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 12/16 Last Date debt was incurred Active 10/17	Last 4 digits of account number 7821			
	-			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$194,131.00

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Debtor 1	Vincent E Harris			Case number (if know)	17-35621
	First Name	Middle Name	Last Name		
Debtor 2	Janet L Harris				
	First Name	Middle Name	Last Name		
	the last page of your fo at number here:	rm, add the dollar value total	s from all pages.	\$194,131.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				Document	Page 19	5 of 56		
Fill in th	is informa	tion to identify your	case:					
Debtor 1		Vincent E Harris						
DODIOI I		First Name	Middle Na	ame	Last Name			
Debtor 2	2	Janet L Harris						
(Spouse if,	filing)	First Name	Middle Na	ame	Last Name			
United S	states Bankı	ruptcy Court for the:	EASTERN	DISTRICT OF VIE	RGINIA			
Case nu	mber 17 -	-35621						
(if known)				_			□ C	heck if this is an
							aı	mended filing
Officia	l Form	106E/E						
			la Haura	l leasa suus.	d Claima			40/45
		: Creditors W				Part 2 for creditors with NON		12/15
Schedule Schedule left. Attacl	G: Executor D: Creditors h the Contin case number	y Contracts and Unexp Who Have Claims Sec uation Page to this pag er (if known).	ired Leases (Of ured by Properi e. If you have r	fficial Form 106G). ty. If more space is no information to r	. Do not include s needed, copy	contracts on Schedule A/B: P any creditors with partially s the Part you need, fill it out, r do not file that Part. On the to	ecured claims number the ent	that are listed in ries in the boxes on the
Part 1:	List All c	of Your PRIORITY Un	secured Clair	ms				
1. Do ar	ny creditors	have priority unsecure	d claims agains	st you?				
■ No	o. Go to Part	2.						
☐ Ye	es.							
Part 2:	List All c	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do ar	ny creditors	have nonpriority unsec	ured claims ag	ainst you?				
□ N	o. You have	nothing to report in this pa	art. Submit this f	orm to the court wit	th your other sche	edules.		
■ Ye	es.							
unsed	cured claim, I one creditor I	ist the creditor separately	for each claim.	For each claim liste	ed, identify what t	b holds each claim. If a credito ype of claim it is. Do not list cla three nonpriority unsecured cl	ims already inc	luded in Part 1. If more
								Total claim
4.1	American	Express Trs		Last 4 digits of ac	ccount number	0633		\$2,653.00
		reditor's Name						
	Po Box 29	97871		140		Opened 09/16 Last A	ctive	
		erdale, FL 33329		When was the de	bt incurred?	10/06/17		
1	Number Stree	et City State ZIp Code		As of the date yo	u file, the claim i	s: Check all that apply		
1	Who incurre	d the debt? Check one.						
I	Debtor 1	only		☐ Contingent				
I	Debtor 2	only		☐ Unliquidated				
I	Debtor 1 a	and Debtor 2 only		☐ Disputed				
I	At least or	ne of the debtors and and	other	Type of NONPRIC	ORITY unsecure	d claim:		
I	☐ Check if	this claim is for a comr	nunity	☐ Student loans				
C	debt		=			ration agreement or divorce th	at you did not	
	_	subject to offset?		report as priority cl				
	No			-	-	g plans, and other similar debt	3	
I	☐ Yes			Other. Specify	Unsecured			

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Debto	r 1 Vincent E Harris r 2 Janet L Harris		Case number (if know) 17-35621	
4.2	Amex	Last 4 digits of account number	5073	\$1,487.00
	Nonpriority Creditor's Name Correspondence Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 04/14 Last Active 10/24/17	, , , , , , , , ,
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		
4.3	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	8680	\$1,450.00
	100 S West St Wilmington, DE 19801	When was the debt incurred?	Opened 12/16 Last Active 10/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		
4.4	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	2507	\$1,540.00
	100 S West St Wilmington, DE 19801	When was the debt incurred?	Opened 12/14 Last Active 10/17	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	reason agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

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	1 Vincent E Harris 2 Janet L Harris		Case number (if know) 17-35621	
4.5	Cap1/dbarn	Last 4 digits of account number	1701	\$26.00
	Nonpriority Creditor's Name Capital One Retail Srvs/Attn: Bankruptcy Po Box 30258 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/15 Last Active 10/17	·
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc		
	□ Yes	Other. Specify Cliarge Act	Journ	
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	2309	\$537.00
	Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130	When was the debt incurred?	Opened 04/10 Last Active 11/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	_		
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9279	\$1,354.00
	Attn: General Correspondence/Bankruptcy Po Box 30285	When was the debt incurred?	Opened 04/16 Last Active 10/17	
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	- •	

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	r 1 Vincent E Harris r 2 Janet L Harris		Case number (if know)	17-35621	
					
4.8	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9355		\$579.00
	Attn: General		Opened 09/14 Last	Active	
	Correspondence/Bankruptcy	When was the debt incurred?	10/17		
	Po Box 30285				
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	■ Other. Specify Credit Card	I		
4.9	Capital One	Last 4 digits of account number	0531		\$515.00
	Nonpriority Creditor's Name				Ψοιοίοο
	Attn: General		Opened 04/10 Last	: Active	
	Correspondence/Bankruptcy Po Box 30285	When was the debt incurred?	10/16/17		
	Salt Lake City, UT 84130				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing		bts	
	Yes	Other. Specify Credit Card	I		
4.1	Canital One		4644		¢2 002 00
0	Capital One Nonpriority Creditor's Name	Last 4 digits of account number			\$3,083.00
	Attn: General		Opened 01/11 Last	Active	
	Correspondence/Bankruptcy	When was the debt incurred?	10/04/17		
	Po Box 30285				
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,			
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	<u> </u>	☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims		,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	☐ Yes	■ Other. Specify Credit Card	I		
		· · · · ———			

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	or 2 Janet L Harris		Case number (if know) 17-35621	
4.1 1	Cash Net USA	Last 4 digits of account number	9499	\$1,600.00
	Nonpriority Creditor's Name P.O .Box 643990 Cincinnati, OH 45264	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	■ Other. Specify Pay Day Lo		
4.1 2	Chase Card	Last 4 digits of account number	0265	\$1,174.00
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 06/16 Last Active 10/01/17	
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	710 of the date you me, the claim	o. Chook an that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citibank / Sears	Last 4 digits of account number	5094	\$4,186.00
	Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Po Box 790040	When was the debt incurred?	Opened 12/14 Last Active 09/17	
	Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	

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	Name		
Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	9250	\$1,690.00
Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63129	When was the debt incurred?	Opened 11/13 Last Active 10/25/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Dell Financial Services	Last 4 digits of account number	6858	\$2,030.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81577	When was the debt incurred?	Opened 01/11 Last Active	
Austin, TX 78708 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	• •	
Yes	Other. Specify Charge Acc	count	
Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	2608	\$6,094.00
Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 04/14 Last Active 10/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharin		
Yes	Other. Specify Credit Card		

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				. –
Henrico Doctor's Hospital Nonpriority Creditor's Name	Last 4 digits of account number			\$500.0
P.O. Box 13620 Richmond, VA 23225	When was the debt incurred?			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce t	hat you did not	
No	Debts to pension or profit-sharing	g plans, and other similar deb	ots	
☐Yes	Other. Specify			
Mid America Bank & T	Last 4 digits of account number	9365		\$705.00
Nonpriority Creditor's Name 121 Continental Dr Ste 1 Newark, DE 19713	When was the debt incurred?	Opened 05/14 Last 07/14	Active	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	,			
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	Student loans			
lebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce t	hat you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar deb	ots	
□ Yes	Other. Specify Credit Card			
Midland Funding	Last 4 digits of account number	5916		\$744.00
Nonpriority Creditor's Name				Ψ1-1-100
Attn: Bankruptcy Po Box 939069	When was the debt incurred?	Opened 06/16 Last 11/15	Active	
San Diego, CA 92193 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	•	,		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	Student loans			
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not	
No	Debts to pension or profit-sharin	g plans, and other similar del	ots	
			edit One	

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Midland Funding	Last 4 digits of account number	2099		\$510.00			
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 939069 San Diego, CA 92193	When was the debt incurred?	Opened 01/13 Last 06/11	Active				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce t	that you did not				
No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts						
□ Yes	Other. Specify Factoring C	•					
Synchrony Bank	Last 4 digits of account number	6427		\$997.00			
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 08/14 Last	Active	***************************************			
Po Box 965060 Orlando, FL 32896 Number Street City State Zlp Code	When was the debt incurred?	10/17					
Who incurred the debt? Check one.	As of the date you file, the claim i	is. Check all that apply					
Debtor 1 only	☐ Contingent						
■ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce t	that you did not				
No	Debts to pension or profit-sharin	g plans, and other similar del	ots				
Yes	Other. Specify Charge Acc	count					
Synchrony Bank/ JC Penneys	Last 4 digits of account number	7309		\$511.00			
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 05/14 Last 10/05/17	Active				
Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
Debtor 1 only	☐ Contingent						
■ Debtor 2 only	☐ Unliquidated						
□ Debtor 1 and Debtor 2 only	Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce t	that you did not				
■ No	Debts to pension or profit-sharin	ig plans, and other similar del	ots				
— NO	Other. Specify Charge Acc						

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2 Janet L Harris		Case number (if know) 17-35621	
Synchrony Bank/Amazon	Last 4 digits of account number	1941	\$2,4
Nonpriority Creditor's Name Attn: Bankruptcy	W	Opened 12/11 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	10/05/17	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Sams Club	Last 4 digits of account number	3368	\$2,0
Nonpriority Creditor's Name			, ,-
Attn: Bankruptcy		Opened 10/14 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	10/17	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.		,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
Yes	Other. Specify Credit Card	<u> </u>	
Synchrony Bank/Walmart	Last 4 digits of account number	3971	\$4,90
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 03/17 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	10/13/17	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane and other similar date.	
No	Debts to pension or profit-sharing		
Yes	Other. Specify Credit Card		

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 1 Vincent E Harris

Debtor 2 Janet L Harris

Case number (if know) 17-35621

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 43,454.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 43,454.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Vincent E Harris			
	First Name	Middle Name	Last Name	
Debtor 2	Janet L Harris			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number	17-35621			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company witl	n whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.4				·	
	Name				_
	Number	Street			
	City		State	ZIP Code	-
2.5		<u> </u>			
	Name				_
	Number	Street			_
	City		State	ZIP Code	=

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		Docume	m Page 26 C	00 00	
Fill in this i	information to identify your	case:			
Debtor 1	Vincent E Harris				
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2	Janet L Harris				
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	OF VIRGINIA		
Officed State	es bankiuptcy Court for the.	LAGILIA DIGITAGI C	7 VIICOINIA		
Case numb	er 17-35621				
(if known)					☐ Check if this is an
					amended filing
Ott: ~: ~!	Гажа 400Ц				
	Form 106H	_			
Schedi	ule H: Your Cod	ebtors			12/15
our name a	and case number (if known)	. Answer every question	l.		p of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No □ Yes					
Arizona ■ No. 0 □ Yes. 3. In Coluin line 2	a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spount Imn 1, list all of your codebt 2 again as a codebtor only i	Nevada, New Mexico, Puuse, or legal equivalent liveors. Do not include your f that person is a guarar	e with you at the time? spouse as a codebton tor or cosigner. Make	ington, and Wisconsin.) r if your spouse is filin sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official
	lumn 2.	roilli 100E/F), or Sched	ule G (Official Form 10	og). Ose Scriedule D,	Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	
	lame			Schedule E/F,	
				☐ Schedule E/F,	
				— Scriedule G, III	<u> </u>
	lumber Street	0	710.0		
С	City	State	ZIP Code		
3.2				☐ Schedule D, lin	
	lame			Schedule E/F,	
				☐ Schedule E/F,	
_				Scriedule G, III	IG
	lumber Street	Ctata	710.0-4-		
С	City	State	ZIP Code		

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Eill is	n this information to identify your	2000				ı			
Debt									
Debt	ior 2 Janet L Ha	rris			_				
	ed States Bankruptcy Court for th	e: EASTERN DISTRICT	OF VIRGINIA						
Case	e number 17-35621					Check if this i	s:		
(If kno			_			☐ An amend	ded filing		
								wing postpetition e following date:	•
Off	ficial Form 106l					MM / DD/	YYYY		
Sc	hedule I: Your Inc	come							12/15
Part 1.	se. If you are separated and you ha separate sheet to this form 1: Describe Employment Fill in your employment information.	. On the top of any additi				d case number (i	f known)		
	If you have more than one job,		■ Employed		■ Emp	oloved			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed	_			employe	d	
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	Genesis Proper	rties					
	Occupation may include student or homemaker, if it applies.	Employer's address	101 West Comm		oad				
		How long employed t	here?						
Part	2: Give Details About Mo	onthly Income							
	nate monthly income as of the se unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in th	e space.	Include your no	n-filing
	or your non-filing spouse have n space, attach a separate sheet t		ombine the informatio	n for all	empl	oyers for that pers	son on th	e lines below. If	you need
						For Debtor 1		Debtor 2 or -filing spouse	
	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	4,006.12	\$	5,017.07	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	_ +\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	4,006.12	\$	5,017.07	

	otor 1 otor 2	Vincent E Harris Janet L Harris	_		Case	e number (<i>if known</i>)	17-3	5621		
	Con	by line 4 here	4.		Fo \$	r Debtor 1 4,006.12		Debtor i-filing s		
	OOF	y line 4 nere	٦.		Ψ_	4,000.12	Ψ_		017.07	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	833.89	\$		862.94	
	5b.	Mandatory contributions for retirement plans	5b	Э.	\$	0.00	\$		0.00	-
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$_	0.00	\$		0.00	_
	5e.	Insurance	56		\$_	388.18	\$		342.81	_
	5f.	Domestic support obligations	5f		\$_	0.00	\$_		0.00	_
	5g.	Union dues	50	-	\$_	0.00	\$_		0.00	-
	5h.	Other deductions. Specify: 401K Savings plan	_ 5r	า.+	\$_	216.67	+ \$_		401.31	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,438.74	\$	1,	607.06	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,567.38	\$	3,	410.01	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00	\$		0.00	-
	8b.	Interest and dividends	8t		\$	0.00	\$_		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	5.	\$	0.00	\$		0.00	-
	8d.	Unemployment compensation	80	d.	\$	0.00	\$_		0.00	_
	8e.	Social Security	86	Э.	\$	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f 8g	g.	\$_ \$_	0.00	\$_ \$_		0.00	-
	8h.	Other monthly income. Specify:	8r	า.+	\$_	0.00	+ \$		0.00	=
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	0.00	\$_		0.00	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,567.38 + \$	2 /	410.01	= \$	5,977.39
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		Σ,307.30	٥,-	10.01	_	3,311.33
11.	Stat Inclu othe Do r	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep			•		Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						. 12.	\$	5,977.39
4.5	_							l	Combin	ned y income
13.	Do y ■ □	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							
	1 1	I CO. LADIGIII.								

						1		
FIII	in this informa	tion to identify yo	our case:					
Deb	tor 1	Vincent E Ha	arris			Chec	ck if this is:	
Deh	otor 2	lanat I Harr	do.				An amended filing	ving postpetition chapter
	ouse, if filing)	Janet L Harr	IS			_	13 expenses as of	01 1
Ì	10: - 5 1	. 6	FAOTE		1.4	_	MM / DD / \\000	
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IA		MM / DD / YYYY	
		7-35621						
(If kı	nown)							
_						ı		
		rm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	If two married people are ch another sheet to this for.				
Par	t 1: Descr	ibe Your House	ehold					
1.	Is this a joir	nt case?						
	☐ No. Go to	line 2.						
	Yes. Doe	s Debtor 2 live	in a separa	ate household?				
	■ N	0						
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D	•	☐ Yes.	Fill out this information for	Dependent's relati	ionship to	Dependent's	Does dependent
	Debtor 2.	cotor rana	□ res.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
								☐ Yes ☐ No
								□ Yes
								□ No
	_							☐ Yes
3.		penses include f people other t	han	No				
		d your depende		Yes				
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Expenses				
exp	imate your ex	penses as of y	our bankrı	uptcy filing date unless you				
Incl	lude expense	s paid for with	non-cash	government assistance if	f you know			
the	value of sucl	h assistance an		luded it on Schedule I: Y			Your exp	enses
(On	ficial Form 10	161.)					Tour exp	
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4. \$;	1,108.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	i	0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
	4c. Home	maintenance, re	epair, and u	ipkeep expenses		4c. \$		0.00
_		owner's associat			and a suite of a co	4d. \$		171.00
5.	Additional r	nortgage payme	ents for yo	our residence, such as hor	me equity loans	5. \$		0.00

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Deb Deb	tor 1 tor 2	Vincent Janet L		Case num	ber (if known)	17-35621
6.	Utilit	ies:				
0.	6a.		, heat, natural gas	6a.	\$	280.00
	6b.	-	wer, garbage collection	6b.	\$	44.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	255.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food		ekeeping supplies	7.	\$	500.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	250.00
10.	Pers	onal care p	products and services	10.	\$	170.00
11.	Medi	ical and de	ntal expenses	11.	\$	0.00
12.	Tran	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	400.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	91.00
14.	Char	itable cont	ributions and religious donations	14.	\$	858.00
15.		rance.				
			nsurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	
		Life insura		15a.	*	0.00
		Health ins		15b.	·	0.00
		Vehicle in		15c.	· -	0.00
			urance. Specify:	15d.	\$	0.00
16.			nclude taxes deducted from your pay or included in lines 4 or 2		Φ.	0.00
17	Spec	,	ease payments:	16.	\$	0.00
17.			ents for Vehicle 1	17a.	\$	0.00
		. ,	ents for Vehicle 2	17a. 17b.	· -	0.00
		Other. Spe		176. 17c.	·	0.00
		Other. Spe	-	17d.	·	0.00
10			ecity. of alimony, maintenance, and support that you did not re		Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Spec			19.		
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this form or o	on Schedule I: Yo	our Income.	
	20a.	Mortgages	s on other property	20a.	\$	0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	ner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22.		•	monthly expenses			4.407.00
			through 21.	0010	\$	4,127.00
			2 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	4,127.00
23	Calc	ulate vour	monthly net income.			
_0.		-	12 (your combined monthly income) from Schedule I.	23a.	\$	5,977.39
			r monthly expenses from line 22c above.	23b.		4,127.00
						4,127.00
	23c.		our monthly expenses from your monthly income.	23c.	\$	1,850.39
24.	For ex	ou expect a xample, do yo ication to the	an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you exterms of your mortgage?			ease or decrease because of a
			Explain here:			
	— 16	. .	Explain 11010.			

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Debtor 1	Vincent E Harris			
	First Name	Middle Name	Last Name	
Debtor 2	Janet L Harris			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number	17-35621			
(if known)				☐ Check if this is an
				amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Dic	d you pay or agree to pay someone who is NC	OT an attorney to help	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that	der penalty of perjury, I declare that I have rea t they are true and correct. /s/ Vincent E Harris	nd the summary and s	/s/ Janet L Harris
	Vincent E Harris		Janet L Harris
	Signature of Debtor 1		Signature of Debtor 2

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Fill in	this info	rmation to identify you	r case:							
Debto	or 1	Vincent E Harris	Middle Name	Last Name						
Debto	r 2	Janet L Harris	Middle Name	Last Name						
	e if, filing)	First Name	Middle Name	Last Name						
United	d States E	Sankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA						
Case	number	17-35621								
(if know	n)				_	theck if this is an mended filing				
						-				
Offic	cial F	orm 107								
Stat	emer	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16				
inform	ation. If er (if kno	more space is needed, wn). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for sup					
1. W	/hat is yo	our current marital statu	ıs?							
	■ Marri	ed arried								
2. D	uring the	uring the last 3 years, have you lived anywhere other than where you live now?								
	•									
_	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.									
[Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					ity property state or territory co, Texas, Washington and W	` ,,,,				
	_	,	, ,	,	, ,	,				
-	■ No 1 Vas I	Make sure you fill out Sch	nedule H: Your Codebtors (Ot	fficial Form 106H)						
	103.1	viake sure you iiii out oor	icadic 11. Todi Godebiois (Ol	modification room.						
Part 2	Ехр	ain the Sources of You	r Income							
F	ill in the t	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
г] No									
	_	Fill in the details.								
			Dalifa d		Dalifar 0					
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
		1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$97,068.30	☐ Wages, commissions, bonuses, tips	\$0.00				
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Debtor 1 Vincent E Harris Debtor 2 Janet L Harris	_				e number (if known) 17-35621			
	Debtor			Debtor 2				
		es of income all that apply.	Gross income (before deductions and exclusions)	Sources of ince Check all that a		Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31,	2016) Wag bonuse	ges, commissions, s, tips	\$104,552.00	☐ Wages, combonuses, tips	missions,	\$0.00		
	□ Оре	rating a business		Operating a	business			
For the calendar year before (January 1 to December 31,		ges, commissions, s, tips	\$96,534.00	☐ Wages, combonuses, tips	missions,	\$0.00		
	□ Оре	rating a business		☐ Operating a l	business			
winnings. If you are filing	a joint case and you gross income from	u have income that y	est; dividends; money collou received together, list in the list i	t only once under De	ebtor 1.			
	Debtor	-		Debtor 2				
		s of income e below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)		
Part 3: List Certain Paym	ents You Made Be	efore You Filed for E	Bankruptcy					
individual prin During the 90 No. G Yes L p * Subject to a Yes. Debtor 1 or D During the 90 No. G Yes L ir	or 1 nor Debtor 2 harily for a personal days before you file to to line 7. ist below each cred aid that creditor. Do to include payments adjustment on 4/01/Debtor 2 or both har days before you file to to line 7. ist below each cred	has primarily consult, family, or household and for bankruptcy, did not include payments to an attorney for the 19 and every 3 years ave primarily consulted for bankruptcy, did not to whom you paid to domestic support ob	mer debts. Consumer ded purpose." If you pay any creditor a to dea total of \$6,425* or more to for domestic support ob its bankruptcy case. If after that for cases filed of the consumer design.	e in one or more pay ligations, such as chon or after the date of tall of \$600 or more?	re? rments and the ild support and fadjustment.	e total amount you ad alimony. Also, do		
Creditor's Name and A	ddress	Dates of paymer	nt Total amount	Amount you	Was this na	ayment for		
			paid	still owe	п. р.	,		

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De	btor 2	Janet L Harris		Cas	se number (if known)	17-35621	
7.	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any gen- control, or owner of 20% of	eral partners; partners r more of their voting	erships of which yog securities; and a	u are a genera ny managing a	I partner; corporations gent, including one for
	_	No					
		Yes. List all payments to an insider.	D-1	T-(-1	A	D	d. !
	insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	inside	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
		No					
		Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment itor's name
Pa	rt 4:	Identify Legal Actions, Repossession	ns and Foreclosures				
9.	List al modifi	n 1 year before you filed for bankrupte Il such matters, including personal injury ications, and contract disputes.	cy, were you a party in an				
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of the	e case
10.		n 1 year before you filed for bankrupto k all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date		Value of the
			Explain what happened	I			property
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any a	mounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a
		No					
		Yes					
Pa	rt 5:	List Certain Gifts and Contributions					
13.	_	n 2 years before you filed for bankrup No	tcy, did you give any gifts	s with a total value	of more than \$60	0 per person?	•
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$600 person	Describe the gifts		Dates the g	you gave	Value
		on to Whom You Gave the Gift and ress:					

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	otor 1 Vincent E Harris otor 2 Janet L Harris			Case number (if kn	own) 17-35621			
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or		give any gifts or contribution	ns with a total va	lue of more than	\$600 to any charity?		
	Gifts or contributions to charities that 1 more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		ribe what you contributed		ates you ontributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since y	ou filed for bankruptcy, did y	you lose anythin	g because of thef	t, fire, other disaster,		
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include the am	insurance coverage for the loount that insurance has paid. It is on line 33 of Schedule A/B:	_ist pending Id	ate of your oss	Value of property lost		
Par	tt 7: List Certain Payments or Transfers	6						
16.	consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No							
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	trans	ription and value of any prop ferred	0	ate payment r transfer was nade	Amount of payment		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address		ription and value of any prop ferred	0	ate payment r transfer was nade	Amount of payment		
 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than protransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property) include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 								
	Person Who Received Transfer Address Person's relationship to you		ription and value of erty transferred	Describe any payments rec paid in excha	eived or debts	Date transfer was made		
19.	beneficiary? (These are often called asset-protection devices.)							
	No☐ Yes. Fill in the details.							
	Name of trust	Name of trust Description and value of the property transferred				Date Transfer was made		

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Debtor 1 Vincent E Harris

Debtor 2 Janet L Harris

Case number (if known) 17-35621

DODIOI Z	Janet E Harris	Case Hamber (# known)	

Par	rt 8: List of Certain Financial Acc	ounts, Instru	ıments, Safe Depos	it Boxes, and Sto	orage Unit	s			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and 2 Code)		ast 4 digits of ecount number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have cash, or other valuables?	within 1 yea	r before you filed fo	or bankruptcy, an	ıy safe dep	posit box or other deposi	itory for securities,		
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and Z	ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a store	age unit or p	place other than you	ır home within 1	year befor	e you filed for bankrupto	;y?		
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and 2	ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?		
Par	rt 9: Identify Property You Hold o	r Control for	•						
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	No								
	☐ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and 2	IP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value		
Par	rt 10: Give Details About Environm	nental Inform	nation						
For	the purpose of Part 10, the following	g definitions	s apply:						
	Environmental law means any federoxic substances, wastes, or materogulations controlling the cleanup	rial into the a	air, land, soil, surfac	ce water, ground					
	Site means any location, facility, or to own, operate, or utilize it, includ			environmental la	aw, wheth	er you now own, operate	, or utilize it or used		
	Hazardous material means anythin hazardous material, pollutant, cont	_		as a hazardous	waste, ha	zardous substance, toxid	c substance,		
Rep	port all notices, releases, and procee	edings that y	ou know about, reg	ardless of when	they occu	ırred.			
24.	Has any governmental unit notified	l you that yo	ou may be liable or p	ootentially liable	under or i	n violation of an environ	mental law?		
	■ No □ Yes. Fill in the details.								
			0	-14	F	numental law 16	Data of matter		
	Name of site Address (Number, Street, City, State and 2	ZIP Code)	Governmental un Address (Number, ZIP Code)	nit Street, City, State and	_	onmental law, if you it	Date of notice		

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Der	Janet L Harris		Case Humber (# known)							
05										
25.	Have you notified any governmental unit of	any release of nazardous material?								
	No Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or adm	,	ironmental law? Include settlements	and orders.						
	_	3 , ·								
	■ No □ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Par	rt 11: Give Details About Your Business or 0	,								
27.		•	ny of the following connections to an	/ business?						
	☐ A sole proprietor or self-employed in	• •	,	,						
	☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLP)							
	☐ A partner in a partnership									
	☐ An officer, director, or managing exe	ecutive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	No. None of the above applies. Go to Part 12.									
	☐ Yes. Check all that apply above and fill	Yes. Check all that apply above and fill in the details below for each business.								
	Business Name Describe the nature of the business Employer Identification number									
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number of ITIN.						
28.	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties.	cy, did you give a financial statement	to anyone about your business? Inclu	ude all financial						
	No									
	Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued								
Par	rt 12: Sign Below									
are t	ve read the answers on this <i>Statement of Fin</i> true and correct. I understand that making a name a bankruptcy case can result in fines up to SU.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property,	or obtaining money or property by fra							
	Vincent E Harris	/s/ Janet L Harris								
	ncent E Harris Inature of Debtor 1	Janet L Harris Signature of Debtor 2								
Dat	November 17, 2017	Date November 17, 201	7							
Did ■ N □ Y	••	nt of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 10	07)?						
	es. Name of Person Attach the Bankrup. Statemer	otcy Petition Preparer's Notice, Declaration of Financial Affairs for Individuals Filing		page 6						

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Debtor 1 Vincent E Harris Debtor 2 Janet L Harris

Case number (if known) 17-35621

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United States Bankruptcy Court Eastern District of Virginia

In re	Vincent E Harris Janet L Harris		Case No.	17-35621
		Debtor(s)	Chapter	13

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR IN A CHAPTER 13 CASE
	(for use in the Richmond Division only)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 5,000.00
	Prior to the filing of this statement I have received \$ 0.00
	Balance Due\$ 5,000.00
2.	\$310.00 of the filing fee has been paid.
3.	The source of the compensation paid to me was:
	$\blacksquare \text{Debtor} \qquad \Box \text{Other} (specify)$
4.	The source of compensation to be paid to me is:
	$\blacksquare \text{Debtor} \qquad \Box \text{Other} (specify)$
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, as required by Local Bankruptcy Rule 2016-1(C)(3).
7.	I am electing to request compensation and reimbursement of expenses in this case:
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a).
	b. \square By submitting applications for compensation in the manner set forth in Local Bankruptcy Rule 2016-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation pursuant to Local Bankruptcy Rule 2016-1(C)(1)(a) and $(C)(3)(a)$ at the commencement of the case will be deemed to have elected to request compensation in the manner set forth within Local Bankruptcy Rule 2016-1(C)(1)(c)(ii).

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CERTIFICATION

I certify that the foregoing is an accurate statement of any	agreement or arrangement for	payment to me for represen	tation of the debtor(s) in
this bankruptcy proceeding.			

November 17, 2017	/s/ Joseph S. Massie, III
Date	Joseph S. Massie, III 35472
	Signature of Attorney
	Massie Law Firm PC

Name of Law Firm 115 N 1st Street Ste 100 Richmond, VA 23219

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

November 17, 2017	/s/ Joseph S. Massie, III
Date	Joseph S. Massie, III 35472
	Signature of Attorney

Fill in this information to identify your case:						
Debtor 1	Vincent E Harris					
Debtor 2 (Spouse, if filing)	Janet L Harris					
United States Bankruptcy Court for the: Eastern District of Virginia						
Case number (if known)	17-35621					

Check	Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, but the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	9,706.83	\$	0.00
Alimony and maintenance payments. Do not include Column B is filled in.	de payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househand roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3	ort. Included old, your spouse of	le regula: depende	contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession, or farm	Debto	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debto	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
Net monthly income from rental or other real property	_	0.00	Copy here ->	Ф	0.00	Ф	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1 Debtor 2	Vincent E Harris Janet L Harris				Case numbe	r (<i>if known</i>)	17-35621	I	
					Column A Debtor 1		Column B Debtor 2 o	or	
7. Int	erest, dividends, and royalties				\$	0.00	\$	0.00	
	nemployment compensation				\$	0.00	\$	0.00	
	o not enter the amount if you contend e Social Security Act. Instead, list it h		was a benefit	under					
	For you		0.00)					
	For your spouse	\$	0.00	_)					
9. Pe	ension or retirement income. Do no nefit under the Social Security Act.		eived that was	a	\$	0.00	\$	0.00	
Do red do	come from all other sources not list on the include any benefits received underwind as a victim of a war crime, a commestic terrorism. If necessary, list other list of the include the in	nder the Social Security Acrime against humanity, or	ct or payments international o	r	\$	0.00	\$	0.00	
				_	Ψ	0.00		0.00	
	Total amounts from concrete a	agge if any		_	Φ	0.00	\$	0.00	
	Total amounts from separate	bages, if any.	F	+	\$	0.00	\$	0.00	
	Ilculate your total average monthly ch column. Then add the total for Co			\$	9,706.83	+ \$ _	0.00	= \$	9,706.83
12. Co	Determine How to Measure You opy your total average monthly included the marital adjustment. Ch	ome from line 11.						\$	9,706.83
10. G	You are not married. Fill in 0 below								
	You are married and your spouse	is filing with you. Fill in 0 b	pelow.						
	You are married and your spouse Fill in the amount of the income lis dependents, such as payment of the	is not filing with you. sted in line 11, Column B, t	that was NOT						
	Below, specify the basis for excludadjustments on a separate page.	•	•					•	
	If this adjustment does not apply,	enter 0 below.							
				\$		_			
				» —		_			
				-\$					
	Total		:	\$	0.0	<u>О</u> Со	py here=>		0.00
14. Y	our current monthly income. Sub	tract line 13 from line 12.						\$	9,706.83
15. C	Calculate your current monthly inc	ome for the year. Follow	these steps:						
1	5a. Copy line 14 here=>							\$	9,706.83
	Multiply line 15a by 12 (the nun	nber of months in a year).						X '	12
1	5b. The result is your current month	nly income for the year for	this part of the	form.				\$1	16,481.96

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Debtor Debtor	r 1 r 2 -	Janet	L Harris		Case number (if known)	17-35621		
16.	Calc	ulate tl	he median family income that applies to you	J. Follow these s	steps:			
	16a.	Fill in t	he state in which you live.	VA	_			
	16b.	Fill in t	he number of people in your household.	2				
		To find	he median family income for your state and siz la list of applicable median income amounts, g	o online using th			\$	72,749.00
17			tions for this form. This list may also be available lines compare?	ole at the bankru	ptcy clerk's office.			
	17a.	_	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO					
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 abo	tion of Your Dis				
Part :	3:	Calc	ulate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)			
18.	Cop	y your	total average monthly income from line 11 .	·		\$		9,706.83
	conte	end tha	marital adjustment if it applies. If you are m t calculating the commitment period under 11 toome, copy the amount from line 13.			ır		
			narital adjustment does not apply, fill in 0 on lin	e 19a.		-\$		0.00
	19b.	Subtra	act line 19a from line 18.				\$	9,706.83
20.	Calc	ulate y	our current monthly income for the year. F	ollow these step	s:	'		
:	20a.	Copy li	ine 19b				\$	9,706.83
		Multipl	y by 12 (the number of months in a year).				x	12
								440 404 00
	20b.	The re	sult is your current monthly income for the yea	r for this part of t	he form		\$	116,481.96
:	20c.	Copy t	he median family income for your state and siz	e of household f	rom line 16c		\$	72,749.00
	04		la the lines command					
•	21.	_	o the lines compare?					
			ine 20b is less than line 20c. Unless otherwise eriod is 3 years. Go to Part 4.	ordered by the o	court, on the top of page 1 of this fo	rm, check bo	x 3, <i>T</i>	he commitment
			ine 20b is more than or equal to line 20c. Unlead Commitment period is 5 years. Go to Part 4.	ss otherwise ord	ered by the court, on the top of pag	e 1 of this fo	rm, ch	eck box 4, The
Part -	4:	Sign	Below					
	By si	gning h	nere, under penalty of perjury I declare that the	information on t	his statement and in any attachme	nts is true an	d corre	ect.
X			nt E Harris	X	/s/ Janet L Harris			
			E Harris of Debtor 1		Janet L Harris Signature of Debtor 2			
I	·	Nove	ember 17, 2017 DD / YYYY		Date November 17, 2017 MM / DD / YYYY			
	If you	u check	ed 17a, do NOT fill out or file Form 122C-2.					

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Vincent E Harris

Debtor 1

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Fill in t	his information to i	dentify your case:		
Debtor	1 Vincent E	Harris		
Debtor (Spous	2 Janet L Ha	arris		
United	States Bankruptcy Co	ourt for the: Eastern District of Virginia		
Case n	umber <u>17-35621</u> /n)		☐ Check if this	is an amended filing
	Form 122C-2 oter 13 Calc	culation of Your Disposab	le Income	04/1
	ut this form, you wil Iment Period (Officia	ll need your completed copy of <i>Chapter 13 S</i> al Form 122C-1).	tatement of Your Current Monthly Incom	e and Calculation of
space is addition	s needed, attach a s nal pages, write you	te as possible. If two married people are filin eparate sheet to this form, Include the line n r name and case number (if known).		
Part 1:	Calculate Your	Deductions from Your Income		
the c	questions in lines 6-	ervice (IRS) issues National and Local Standa 15. To find the IRS standards, go online usin available at the bankruptcy clerk's office.		
expe	nses if they are higher	unts set out in lines 6-15 regardless of your acturer than the standards. Do not include any operator any amounts that you subtracted from your sp	ting expenses that you subtracted from inco	
If you	ur expenses differ from	m month to month, enter the average expense.		
Note	: Line numbers 1-4 a	re not used in this form. These numbers apply to	o information required by a similar form used	d in chapter 7 cases.
5.	The number of peop	ple used in determining your deductions from	m income	
		people who could be claimed as exemptions on ny additional dependents whom you support. The in your household.		2
Natio	onal Standards	You must use the IRS National Standards	to answer the questions in lines 6-7.	
		other items: Using the number of people you dollar amount for food, clothing, and other items		\$1,132.00
7.	Out-of-pocket healt	h care allowance: Using the number of people	you entered in line 5 and the IRS National S	Standards, fill in

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Vincent E Harris Debtor 1 Janet L Harris 17-35621 Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 98.00 98.00 Copy here=> People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> 0.00 7g. Total. Add line 7c and line 7f 98.00 Copy total here=> 98.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 533.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,290.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Ocwen Loan Servicing, Llc 1,100.00 Repeat this amount Сору 1,100.00 1.100.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 190.00 190.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Janet L Harris 17-35621 Debtor 2 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 430.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 2010 Lexus RX 350 94000 miles 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Old Point National Ban** 611.00 Repeat this Copy amount on **Total Average Monthly Payment** 611.00 611.00 line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Describe Vehicle 2: 2017 Toyota Rav 4 6500 miles 13d. Ownership or leasing costs using IRS Local Standard..... 485.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment **Toyota Motor credit Corp** 609.00 Copy Repeat this amount on line 33c. here Total average monthly payment 609.00 609.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Vincent E Harris

Debtor 1

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Debtor 1 Debtor 2 Vincent E Harris
Janet L Harris

Case number (if known) 17-35621

Oth	er Nece		In addition to the expense de the following IRS categories		ns listed above	, you are allowed your monthly expenses	s for	
16.	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						\$	1,922.86
17.		•	he total monthly payroll dedu	ıctions t	hat your job re	quires, such as retirement		
	contributions, union dues, and uniform costs.					•	0.00	
			. , , ,	-	•	01(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					\$	29.00	
19.			The total monthly amount the			by the order of a court or		
			as spousal or child support past due obligations for spo			You will list these obligations in line 35.	\$	0.00
20.	Educa	tion: The total month	ly amount that you pay for e	ducation	n that is either	required:		
	as a	a condition for your jo	b, or					
	for y	your physically or me	ntally challenged dependent	child if	no public educ	ation is available for similar services.	\$	0.00
21.			y amount that you pay for ch			sitting, daycare, nursery, and preschool.	\$	0.00
22.	Additio	onal health care exp	enses, excluding insurance	e costs	: The monthly	amount that you pay for health care		
	that is	required for the healt		depend	ents and that is	s not reimbursed by insurance or paid		
	Payme	ents for health insurar	nce or health savings accoun	ts shou	d be listed onl	y in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment	+\$	0.00
24.		II of the expenses alles 6 through 23.	lowed under the IRS exper	nse allo	wances.		\$	4,334.86
Add		Expense Deduction	s These are additional de Note: Do not include ar					
25.	insurar					ises. The monthly expenses for health oly necessary for yourself, your spouse, o	r	
	Health	insurance		\$	642.23			
	Disabil	ity insurance		\$	0.00			
	Health	savings account	+	\$	0.00	7		
	Total			\$	642.23	Copy total here=>	\$	642.23
	Do you	actually spend this t						
		No. How much do y	ou actually spend?	\$				
	_			· -				
26.	continu	ue to pay for the reasousehold or member	onable and necessary care a	and supp o is una	oort of an elder ble to pay for s	e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may 529A(b)	\$	0.00
27.						enses that you incur to maintain the ses Act or other federal laws that apply.		
	By law, the court must keep the nature of these expenses confidential.				\$	0.00		

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ebtor 1 ebtor 2	Vincent E Harris Janet L Harris		Case number (if	known)	17-3	5621		
	Additional home energy costs. Your home line 8.	e energy costs are included in your ins	surance and ope	rating	expense	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en		gy costs include	d in ex	penses	on line	•	
	You must give your case trustee documenta amount claimed is reasonable and necessa		must show that	the ad	ditional		\$_	0.00
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.							
	You must give your case trustee documenta claimed is reasonable and necessary and n		must explain wl	hy the	amount			
	* Subject to adjustment on 4/01/19, and eve	ry 3 years after that for cases begun o	n or after the da	ite of a	djustme	nt.	\$_	0.00
	Additional food and clothing expense. The higher than the combined food and clothing than 5% of the food and clothing allowances	allowances in the IRS National Standa						
	To find a chart showing the maximum additi instructions for this form. This chart may als			e sepa	rate			
	You must show that the additional amount of	laimed is reasonable and necessary.					\$_	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.			of cas	h or fina	ancial		
	Do not include any amount more than 15%	of your gross monthly income.					\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$	642.23
Dedu	ictions for Debt Payment							
33. F	or debts that are secured by an interest i pans, and other secured debt, fill in lines	33a through 33e.						
33. F lo		33a through 33e. ent, add all amounts that are contractua						ge monthly ent
33. F	coans, and other secured debt, fill in lines to calculate the total average monthly payment reditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractual kruptcy. Then divide by 60.	ally due to each	secure	ed	=>	Average payments	
33. F I C	coans, and other secured debt, fill in lines to calculate the total average monthly payment reditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractua	ally due to each	secure	ed	>	payme	ent
33. F Id	coans, and other secured debt, fill in lines to calculate the total average monthly paymer reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractuals likruptcy. Then divide by 60.	ally due to each	secure	ed	'	payme	ent
33. F I C C C C C C C C C C C C C C C C C C	cans, and other secured debt, fill in lines to calculate the total average monthly payme reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	33a through 33e. ent, add all amounts that are contractuals likruptcy. Then divide by 60.	ally due to each	secure	ed	'	\$	1,100.00
33. F 16 C C C C C C C C C C C C C C C C C C	cans, and other secured debt, fill in lines to calculate the total average monthly payme treditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	33a through 33e. ent, add all amounts that are contractuals likruptcy. Then divide by 60.	ally due to each	secure	ed	=>	\$\$	1,100.00 611.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly payme reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	33a through 33e. ent, add all amounts that are contractuals likruptcy. Then divide by 60.	ally due to each	Doe	ed	=> => ent	\$\$	1,100.00 611.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractuals likruptcy. Then divide by 60.	ally due to each	Doe	es paym ude taxe	=> => ent	\$\$	1,100.00 611.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractuals likruptcy. Then divide by 60.	ally due to each	Doe incl	es paym ude taxe nsuranc No	=> => ent	\$\$ \$\$	1,100.00 611.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractually skruptcy. Then divide by 60. Identify property that secures the de	ally due to each	Doe	es paymude taxensuranc	=> => ent	\$\$	1,100.00 611.00 609.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt Conrad Accpt	33a through 33e. ent, add all amounts that are contractually skruptcy. Then divide by 60. Identify property that secures the de Timeshare Bahammas	ally due to each	Doe incl or in	es paymude taxensuranc No Yes No	=> => ent	\$\$ \$\$	1,100.00 611.00 609.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractually skruptcy. Then divide by 60. Identify property that secures the de	ally due to each	Doe incl	es paymude taxensuranc	=> => ent	\$\$ \$\$	1,100.00 611.00 609.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly payme reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt Conrad Accpt Toyota Motor credit Corp	and all amounts that are contractually and all amounts that are contractually are the device by 60. Identify property that secures the description of the descriptio	ally due to each	Doe incl or in	es paymude taxensuranc No Yes No	=> => ent	\$\$ \$\$	1,100.00 611.00 609.00 108.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt Conrad Accpt	33a through 33e. ent, add all amounts that are contractually skruptcy. Then divide by 60. Identify property that secures the de Timeshare Bahammas	ally due to each	Doe incl or in	es paymude taxensuranc No Yes No Yes	=> => ent	\$\$ \$\$	1,100.00 611.00 609.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly payme reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt Conrad Accpt Toyota Motor credit Corp Tricom Management	and all amounts that are contractually and all amounts that are contractually are the development. Then divide by 60. Identify property that secures the de Timeshare Bahammas 2014 Toyota Camry 65000 mile	ally due to each	Doe incl or in	es paymude taxensurance No Yes No Yes No Yes No Yes No	=> => ent	\$ \$ \$ \$	1,100.00 611.00 609.00 108.00 420.00
33. File To co. 33a. 33b. 33c. 33d.	cans, and other secured debt, fill in lines to calculate the total average monthly payme reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt Conrad Accpt Toyota Motor credit Corp	and all amounts that are contractually and all amounts that are contractually are the device by 60. Identify property that secures the description of the descriptio	ally due to each	Doe incl or in	es paymude taxensuranc No Yes No Yes No Yes No Yes	=> => ent	\$ \$ \$	1,100.00 611.00 609.00 108.00 420.00

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Vincent E Harris Debtor 1 Janet L Harris 17-35621 Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount -NONE-\$ $\div 60 = $$ Сору total 0.00 0.00 Total \$ here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. The Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 0.00 ÷ 60 \$ 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> \$ 3,111.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,334.86 expense allowances Copy line 32, All of the additional expense deductions 642.23 Copy line 37, All of the deductions for debt payment +\$ 3,111.00 8.088.09 8.088.09 Total deductions..... Copy total here=>

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Debtor 1 Debtor 2	Vincent E Harr			Ca	se numl	ber (if known)	17-35621	
Part 2:	Determine Y	our Disposable Income Under 1	1 U.S.C. § 1325(b)(2)				
		urrent monthly income from line or Current Monthly Income and (\$	9,706.83
chi disa rec	Idren. The monability payments eived in accordance in acco	ably necessary income you reconthly average of any child support of or a dependent child, reported in ance with applicable nonbankrupt spended for such child.	payments, foster c Part I of Form 12	are payments, or 2C-1, that you	\$		0.00	
em in 1	necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts employer withheld from wages as contributions for qualified retirement plans, in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement specified in 11 U.S.C. § 362(b)(19).				i \$		0.00	
42. Tot	al of all deduc	tions allowed under 11 U.S.C. §	707(b)(2)(A). Cop	y line 38 here=	:> \$	8,08	8.09	
exp the	enses and you ir expenses. Yo	ecial circumstances. If special ci have no reasonable alternative, co ou must give your case trustee a d I documentation for the expenses.	escribe the special etailed explanation	l circumstances ar	nd			
Descri	be the special	circumstances		Amount of expe	ense			
				\$				
•				\$				
				\$				
-				<u> </u>				
			Total \$_	0.00	Co _l	py re=> \$ 	0.00	
44. To t	al adjustments	s. Add lines 40 through 43.		=>	\$	8,088.09	Copy here=> -\$	8,088.09
45. Ca l	culate your mo	onthly disposable income unde	r § 1325(b)(2). Sub	otract line 44 from	line 39	9.	\$	1,618.74
Part 3:	Change in Ir	ncome or Expenses						
hav time you	ve changed or a e your case will ı filed your petiti	e or expenses. If the income in Fare virtually certain to change after be open, fill in the information belon, check 122C-1 in the first coluifill in when the increase occurred,	the date you filed ow. For example, i nn, enter line 2 in	your bankruptcy po f the wages report the second column	etition ed inc n, expl	and during the reased after	e	
Form	Line	Reason for change		Date of change	•	Increase or decrease?	Amount o	of change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase	\$ \$	
1 220	C-2			_		☐ Decrease	\$	

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Debtor 1 Debtor 2	Janet L Harris		Case number (if known)	17-35621
Part 4:	Sign Below			
	sy signing here, under penalty of perjury you de		on this statement and in any att	acnments is true and correct.
	Vincent E Harris Signature of Debtor 1		Janet L Harris Signature of Debtor 2	
_	November 17, 2017 MM / DD / YYYYY	Date	November 17, 2017	

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Debtor 1 Vincent E Harris
Debtor 2 Janet L Harris

Case number (*if known*) 17-35621

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **05/01/2017** to **10/31/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Genesis Properties

Income by Month:

6 Months Ago:	05/2017	\$4,159.79
5 Months Ago:	06/2017	\$4,159.79
4 Months Ago:	07/2017	\$4,159.79
3 Months Ago:	08/2017	\$4,159.79
2 Months Ago:	09/2017	\$4,159.79
Last Month:	10/2017	\$4,159.79
	Average per month:	\$4,159.79

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Lee Hecht Harrison

Income by Month:

6 Months Ago:	05/2017	\$5,547.04
5 Months Ago:	06/2017	\$5,547.04
4 Months Ago:	07/2017	\$5,547.04
3 Months Ago:	08/2017	\$5,547.04
2 Months Ago:	09/2017	\$5,547.04
Last Month:	10/2017	\$5,547.04
	Average per month:	\$5,547.04

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.